SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.

Washburn, WI 54891 (715) 373-6138 PO Box 58

BAYFIEAD GOUNTE, WISCOMSIN Date State (1977) 23 2015

Bayfield Co. Zoning De

Refund:	Amount Paid:	Date:	Parmit #:	
	1.6-16	1-16-16	16-0005	100

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Contractor:
RICLL
Authorized Agei TYPE OF PERMIT REQUESTED | | | LAND USE | SANITARY | | PRIVY | Owner's Name: | Mailing Address: Existing Structure: (if permit being applied for is relevant to it) Proposed Construction: S 0511.h of Completion MARK donated time & Value at Time Non-Shoreland Shoreland Proposed Use 1500 FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept flability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. PROJECT LOCATION Silver Owner(s):
(If there are Multiple Owners listed Municipal Bse 2018 Commercial Use Residential Use Secretarial Staff Hec d for Issuan Rec'd for Issuan Section eng Eur Eur Secretarial Sta 1/4 (၁ (၁ ERMOT 5 ☐ Conversion
☐ Relocate (existing to ☐ Run a Business of ☐ Run a MERC! ☐ Addition/Alteration TERROT $\hfill\square$ Is Property/Land within 1000 feet of Lake, Pond or Flowage Legal Description: Ts Property/Land within 300 feet of River, Stream Creek or Landward side of Floodplain? **New Construction** Property ないな , Township <u>\</u> DECK - B 1/4 Project < BUNLT Other: Special Use: (explain) _____ Conditional Use: (explain) Residence (i.e. cabin, hunting shack, etc.) Accessory Building Addition/Alteration (specify) Mobile Home (manufactured date) Bunkhouse w/ (☐ sanitary, or Principal Structure (first structure on property) Accessory Building Addition/Alteration (specify) ting bldg (Use Tax Statement) Dead All Owners must sign or letter(s) of authorization must accompany this application) (explain) N, Range with a Porch
with (2nd) Porch
with Deck # of Stories and/or basement with Attached Garage with (2nd) Deck with Loft Foundation 2-Story Basement 1-Story No Basement 1-Story + Loft 6 Lot(s) CARSUE
Contractor Phone: 353
273-\$127
Agent Phone: 563 ٤ City/State/Zip: 73 If yes-☐ sleeping quarters, <u>or</u> **Proposed Structure** -812 Length: Length: Seasonal Year Round continue continue Use WAMAKA Town of: DG - 10 ol & Page ₩ 200 ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. ☐ OTHER

City/State/Zip: Telephone: 0 • 2083 Plumber: Agent Mailing Address (include City/State/Zip): Distance Structure is from Shoreline : ,... Distance Structure is from Shoreline: bedrooms ☐ cooking & food prep facilities) 8 None w N H Lot(s) No. 얓 ## † Ç Smanne Width: Width: ☐ Sanitary (Exists) Specify Type
☐ Privy (Pit) or ☐ Vaulted (n
☐ Portable (w/service contract) 2808 None Municipal/City (New) Sanitary **Compost Toilet** Block(s) No. Sewer/Sanitary System 2 36 Is on the property? Recorded Dacument: (i.e. P What Type of Subdivision こんかんにつ Specify Type: Date C **Dimensions** 10 Is Property in Floodplain Zone?

Ves × × × × × ×× |×|×|×|×|× Height: Height: 5 n 200 gallon) (i.e. Property Attached Written Authorization Plumber Phone: Cell Phone: Acreage Page(s)_ 60 0 N Are Wetlands
Present?
□→Yes
□ No 동 Square Footage in - 1 Nell Well Water City

Retestar If you recently purchased the pr MN/3382 Attach
Copy of Tax Statement
roperty send your Recorded Deed

Date

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

DHE.

300

Authorized Agent:

Address to send permit

2083

STARBURST

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(1) 3

signing on

behalf of the owner(s) a letter of authoria

		Hold For Fees:		Hold For Affidavit:		Hold For TBA:	Hold For Sanitary:	Hold For Sanitary:	T 1
mval: 1/2 1347	Date of Approval:							ionature of Insper	A
							61 To 5/80+	9	i
bection:	Date of Re-Inspection:	had)	Lift No they need to be attached)	3	Inspected by	onditions Atta	11-24-15	Date of Inspection:	اج ا
ion (,)	Zoning District Lakes Classification						2	Inspection Record:	_
ONC TO NO	J*Yes	Were Property Lines Represented by Owner Was Property Surveyed	Were Property Line		0	β¥es □ No	Was Parcel Legally Created Was Proposed Building Site Delineated	Was Proposed Bu	
	***	/ Variance (B.O.A.) Case	Previously Granted by Variance (B.O.A.)				te (B.O.A.) Case #:	Granted by Variance (B.O.A.) ☐ Yes ☐ No	l - 6
d UYes Mo	Affidavit Required Affidavit Attached		- a	J-6	Permit Date: rd) permit Date:	Permit "Yes (Deed of Record) "Yes (Fused/Contiguous Lot(s)) "Yes "Yes"	hip Lot	Permit # 16 -055 Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	
8.8-05	Sanitary Date:	# of bedrooms:	7	Sanitary Number: 4673; Reason for Denial:	Sanitary Number: Reason for Denial:	e Only)	Issuance Information (County Use Only) Permit Denied (Date):	Issuance Informa Permit Denied (Date):	- v -
and <u>Well</u> (W).	ık (HT), Privy (P), and begun. Irm Dwelling Code	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	, Septic Tank (ST), Drain the Date of Issuance if Municipalities Are Requirederal agencies may also	Construction, 2 (1) Year from Dwelling: ALL I City, State or F	its Expire One Two Family I own, Village,	osed Location and Use Permof New One & The local T	Stake or Mark Prop NOTICE: All I For The Construction	(9)	
ured must be visible from structure, or must be	setback must be measu the proposed site of the	other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.	the minimum required setback, of a corrected compass from a	irty (30) feet from t Department by use	wher's expense. et but less than th verifiable by the	ore than ten (10) fe surveyed corner, or	corner or marked by a license construction of a structure mo orner to the other previously eyor at the owner's expense.	ther previously surveyed for to the placement or the previously surveyed of arked by a licensed surv	3 9 7 9
previously surveyed corner to the	visible fram one	setback must be measured must be	boundary line from which the setback must be	2	the minimum rec	thin ten (10) feet o	Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the minimum required	etback to Privy (P S
/Var Feet			Setback to Well	Feet			Tank or Holding Tank ield	Setback to Septic Tank Setback to Drain Field	2 2
		plain	Elevation of Floodplain	Feet	250		East Lot Line	etback from the	S
Feet No		n property	Setback from Wetland 20% Slope Area on property	Feet	30		South Lot Line West Lot Line	Setback from the South Lot Line Setback from the West Lot Line	N N
reet		Bank or bluit	Setpack Irolli tile bank or bidii	Feet	100		North Lot Line	etback from the	S
₹3ca Feet Feet	er mark)	Lake (ordinary high-water River, Stream, Creek	Setback from the River, Stream,	Feet	8	Road Way	Centerline of Platted Road Established Right-of-Way	Setback from the Setback from the	SS
Measurement		Description		ement	Measurement		Description		
nning & Zoning Dept.	proved by the Plai	Changes in plans must be approved by the Planning & Zoning Dept.	Cha		est point)	d to the clos	Setbacks: (measured to the closest point)	(8)	
		•)		ing)	ríor to continu	complete (1) - (7) above (prior to continuing)	Please comple	
								A. (1994)	
	/or (*)	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Roal Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	on n Frontage Roa is on your Pro it Tank (ST); Stream/Cre; Slopes over 20	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Fro All Existing Structures o (*) Well (W); (*) Septic (*) Lake; (*) River; (*) Sio (*) Wetlands; or (*) Slo	Propose North (N (*) Drive All Existi (*) Well (*) Lake; (*) Wetl	Show Location of: Show / Indicate: Show Location of (*): Show: Show: Show: Show any (*): Show any (*):	(1) (2) (3) (4) (5) (6)	
			e applying for)	what you are	regardless of	ur Property (e box below: Draw or Sketch your Property (regardless of what you are applying for)	🖍 🦽 box belov	r

yfield County, WI



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

D) Date of the Way of the World of the World

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Date:

Surkey Permit #: Amount Paid:

16-88 g 1-6-16 : 6-16 JACEN' Attach sept Provide names solely respons

Refund:

NOV 172015

□ Non-Shoreland □	∑ Shoreland —		Section 2	1/4,	PROJECT LOCATION	Rick	Authorized Agent: (Per	Contractor: R. H. R.	45245 0	Address of Property:	るられるのう	Owner's Name:	TYPE OF PERMIT REQUESTED-	Checks are made payable DO NOT START CONSTRUC	INSTRUCTIONS: No permi
	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage	Z-Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yescontinue	Township 43 N, Range 6	1/4 Gov't Lot Lot(s)	Legal Description: (Use Tax Statement)	RUL YERHAT	Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor: Rele YENGHOT BULLOUR	45245 OHURO POERIUE		を こ		☐ LAND USE ☐	nt.	INSTRUCTIONS: No permits will be issued until all fees are paid.
	ke, Pond or Flowage If yescontinue	er, Stream (incl. Intermittent) If yescontinue	`w	(s) CSM Vol & Page	PIN: (23 digits) 04- 634-2-43-(SHAME		Contractor Phone: F	CHOLE,	City/State/Zip:	374 MILLAUKE RO	Mailing Address:	SANITARY PRIVY	Sayfield Co. Zoning Dept	
	Distance Structure is from Shoreline :	Distance Structure is from Shoreline:	MAMAKAGON	Lot(s) No. Block(s) No.	PIN: (23 digits) Recorded 04- 03 4-2-43-66-02 多のさったとーンシャンVolume	Rich SER TXN	Agent Mailing Address (include City/State/Zip):	Plumber: BUNGARM	WI	£.	tosof thosof	City/State/Zip:	☐ CONDITIONAL USE ☐ SPE	pt.	
	ř		Lot Size	Subdivision:	Recorded Docume	22405 NEW	k/State/Zip):				M		SPECIAL USE 🗆 B.O.A.		Refutio:
		Is Property in Are Wetlands Floodplain Zone? Present?	Acreage	x Roset	Document: (i.e. Property Ownership)	Attached Yes 🗆 No	Written Authorization	Plumber Phone:	457-357-468	Cell Phone:		Telephone:	D.A. OTHER		

		,		375-650	Λ		Value at Time of Completion * include donated time & material
	Property	□ Run a Business on	☐ Relocate (existing bldg)	□ Conversion	□ Addition/Alteration	New Construction	Project
		□ No Basement	∠ Basement	□ 2-Story	☐ 1-Story + Loft		# of Stories and/or basement
					Year Round	☐ Seasonal	Use
		□ None		Z 3	□ 2	□ 1	# of bedrooms
□ None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ○ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	(New) Sanitary Specify Type: How Well	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
>	<u> </u>	L			^K ₩ell	□.City	Water

Silet.	1/	oposed Construction:
Width: Height: 54	Ð	disting Structure: (if permit being applied for is relevant to it) Length:

	×	Other: (explain)	
	(x)	Conditional Use: (explain)	
	(X)	Special Use: (explain)	Hecd for ISSUA
	-		The state of the s
	×	Accessory Building Addition/Alteration (specify)	
	×	Accessory Building (specify)	D N S Red White D
	×	Addition/Alteration (specify)	
	×	Mobile Home (manufactured date)	Hec'd for Issuante
	(×	Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	American control of the control of t
476	(De x 26)	with Attached Garage	Commercial Use
	×	with (2 nd) Deck	
212	(\$ x \$7)	with a Deck	
	×	with (2 nd) Porch	
240	(15 × 16)	with a Porch	★ Residential Use
	×	with Loft	
	×	Residence (i.e. cabin, hunting shack, etc.)	
1645	- 22 × 25 C	Principal Structure (first structure on property)	Z
Square Footage	Dimensions	Proposed Structure	Proposed Use く
		The state of the s	

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

Tam (are) result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

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	1::1
•	10.1
2	E)

re Multiple Owners listed on Deed All Owners must sign or letter(s) of authorization must accompany this application)

(Authorized Agent: (If you alf of the owner(s) a letter of authorization application)

Address to send permit

Date -72 Date

(7) Show any (*): $_{gW}$ Location of (*): _{pcation} of: each your Property (regardless of what you are applying for) Proposed Construction

North (N) on Plot Plan

(*) Driveway and (*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20%

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

		eŧ	Feet	Setback to Privy (Portable, Composting)
		e	Feet	Setback to Drain Field
10	Setback to Well	et	(0 Feet	Setback to Septic Tank or Holding Tank
Feet	Elevation of Floodplain	4	S¶ Feet	Setback from the East Lot Line
∏Yes 🐬	20% Slope Area on property	e	Feet	Setback from the West Lot Line
S	Setback from Wetland	4	G Feet	Setback from the South Lot Line
200		Feet	S Fe	Setback from the North Lot Line
See to	Setback from the Bank or Bluff	3000		
	Setback from the River, Stream, Creek	#	Feet	Setback from the Established Right-of-Way
\$	Setback from the Lake (ordinary high-water mark)	et	Feet	Setback from the Centerline of Platted Road
N				
Measuremen	Description		Measurement	Description

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W)

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number: K-11SC	# of bedrooms:	Sanitary Date: //2_1/4_1/5)-14-12	
Permit Denied (Date):	Reason for Denial:				
Permit#://6-0006 Pe	Permit Date: 1,-6-16				
Is Parcel a Sub-Standard Lot Yes (Deed of Record) Is Parcel in Common Ownership Parcel in Common Ownership Structure Non-Conforming :Yes	ot(s)) UNO Mitigation Required UNO Mitigation Attached	dTes □ No	Affidavit Required Affidavit Attached	Ares I No	δō
Granted by Variance (B.O.A.) Case #: リイールろ	Previously Granteo	Previously Granted by Variance (B.O.A.) 【Yes □ No Case #	#		
Was Parcel Legally Created XYes □ No Was Proposed Building Site Delineated XYes □ No	Were Property I	Were Property Lines Represented by Owner Was Property Surveyed	Seld Sald		□ No
Inspection Record: OK 7. Styt.			Zoning District Lakes Classification		
	Inspected by: QC		Date of Re-Inspection:	tion:	
Condition(s) Town, Committee or Board Conditions Attached? The Idno Tif No they Must gd unc, 1 0.1 m. La. L.	need t	obe attached.) Comply W. th	r BOA		
Must compy with Bost 11					
Signature of Inspector: Alloway			Date of Approval:	val: $\mathcal{D}_{\mathcal{M}}$	蠡
Hold For Sanitary:	Hold For Affidavit:	Hold For Fees:	O		

Nelson Site Map

